



## REQUEST FOR SEWER FEE ADJUSTMENT

City of Goodyear  
Finance Department  
P.O. Box 5100  
Goodyear, AZ 85338-0601



NOTE: The information provided on this form will be used to adjust your sewer fee for water consumption that is not disposed of through the City's wastewater collection system. Sewer Fees are based on your average water consumption for the winter months billed in January, February and March of this year. If you believe the water consumption for these three months is a misrepresentation of your water that is disposed of through the City's wastewater collection system, please complete the following information.

**Have you had a home irrigation check in the past 12 months ? YES \_\_\_\_\_ NO \_\_\_\_\_**

If Home Irrigation Check was completed that data will be used for calculations.

**Did you submit a request for sewer fee adjustment last year ? YES \_\_\_\_\_ NO \_\_\_\_\_**

### 1. Customer Information:

NAME: \_\_\_\_\_ ACCOUNT #: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ HOME PHONE#: \_\_\_\_\_

CITY/STATE/ZIP: Goodyear, AZ 85338 CELL PHONE#: \_\_\_\_\_

WINTER AVERAGE  
For City Use Only

### 2. Water Usage Information:

**Any changes on water usage from last year? Yes \_\_\_\_\_ No \_\_\_\_\_**

|   |         |       |
|---|---------|-------|
| 1. Number of Occupants in Household:      |         |       |
| 2. Winter Lawn (square footage) LxW       | Sq. ft. | _____ |
| 3. Garden (square footage) LxW            | Sq. ft. | _____ |
| 4. Number of Trees:                       | Total   | _____ |
| 5. Number of Shrubs:                      | Total   | _____ |
| 6. Size of Pool, Spa, Fountains or Ponds: | Sq. ft. | _____ |
| LxW of surface area of pool               |         |       |

### 3. Water Leaks:

**Were leaks detected and repaired**

**during January, February & March ?**

**Yes: \_\_\_\_\_ No: \_\_\_\_\_**

**(Actual receipts for materials purchased and/or work done MUST be attached)**

**(Appeal will be denied if no documentation is provided.)**

3a. Estimated leakage in gallons/month \_\_\_\_\_ Gallons

### 4. Pool filled or repairs :

**Yes: \_\_\_\_\_ No: \_\_\_\_\_**

**during January, February & March ?**

**(Actual receipts for materials purchased and/or work done MUST be attached)**

**(Appeal will be denied if no documentation is provided.)**

4a. Pool repairs? **Yes: \_\_\_\_\_ No: \_\_\_\_\_**

4b. Initial pool fill? **Yes: \_\_\_\_\_ No: \_\_\_\_\_**

4c. Number of gallons due to repair or initial fill \_\_\_\_\_ Gallons

**5. Livestock :**

**(Definition for appeal purposes is a horse or a 4 legged food producing animal)**

**(Household pets do not qualify as livestock.)**

5a. Total number of Livestock at property \_\_\_\_\_ Total

**6. Other Comments:** \_\_\_\_\_

The above information is accurate to the best of my knowledge. I understand that the given values are subject to verification and if there is an error, I will be charged for any incorrect allowance not previously billed. Any allowances, based on the information provided will be reflected in future bills. Please call the Finance Department at 623-932-3015 with questions.

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

APPROVED BY: \_\_\_\_\_

DATE: \_\_\_\_\_

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